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### Hearing on Improving Programs Designed to Protect At-Risk Youth

June 23, 1999, twelve years ago, was a day that changed the course of history for my husband and me. Having received our foster parent license in the state of South Carolina, a call came to provide respite for a two year old child who was in the process of reunification with a biological father. The child's foster mother, her fourth caregiver in her short time on this earth, was out of town. We were to keep the child for a week -- until the foster mother's return.

A one week commitment continues now as a twelve year odyssey.

In spite of the fact that this child was in foster care and attended daycare five days per week, in less than three hours of being in our care, we discovered what would be diagnosed two days later as genital warts around the child's rectum. A forensic exam indicated anal penetration during the time spent with the father, and that the abuse had continued long term. Removed from the biological parents at eight months of age, the child had returned often for unsupervised visits apparently to be continually abused.

One week turned into three as the Department of Social Services began to investigate every possible perpetrator, from the father to the daycare to the foster mother. No perpetrator was identified until, three months later, we were still parenting this child.

Then it happened. One day, this beautiful, incredibly intelligent, yet haunted child said to me, "Mommy, tell my brother's daddy 'DON'T TOUCH MY BOTTOM NO MORE! TELL HIM NO! NO!'"

The biological brother came on visits with her father at the local DSS office.

Stunned, I braced myself and replied, "I promise it will *never* happen again."

We had no extra money and had no idea what to do, but we researched until we found who we believed to be the best attorney in our state. He'd never lost a case. We asked

him if we could hire him to represent the child along with the DSS attorney who was overworked and overwhelmed. At age five and a half, we finalized our adoption of this child.

This child's path toward healing was slow and painful and continues today. Between ages two and three and a half, the child had screaming fits where we had to hold the child like a baby but with caution so that we were not kicked, hit, or bitten. The child began slowly and the fits increased until they would last anywhere from 45 minutes to two hours and would occur up to four times per day. I left my job to be a stay at home mother. We sold our home and bought one we could afford on one salary.

Eventually, the child was able to make it through a half day of preschool with no problems.

Now, the child is 14 and two grade levels behind in school, but not for a lack of IQ or ability. Ghosts continue to haunt this child; bipolar disorder continues to send this child on a constant motion that is impossible to control. The child struggles with school socially, emotionally, and academically trying to balance the good weeks so that they overcome the bad, but the child continues to be haunted daily and nightly by the ghosts from her past. We have finally accepted that full healing will likely never come. Instead, we will manage the condition as best as possible. Afraid to be alone, we hope to get a therapeutic dog so that as an adult, there will be the opportunity for independence without the need to rely on others to survive.

When our first child was three, the phone rang. Our baby was a few days away from being one year old and was hospitalized for a horrible assault by the biological mother. One eye was swollen shut. Two were blackened, and there was a knot on the temporal lobe that stayed for a month. Most notable was the baby's size. He was 15 pounds at almost 12 months old.

The baby came home and within a week and a half had chubby cheeks and a huge smile. Three huge meals per day, larger than the meals that we as parents ate along with four bottles per day, and the baby had chubby cheeks within a week. I remember the very moment I was rocking the baby in the wee hours, feeding a bottle, looking the baby in the eyes and fell in love.

Three weeks after the baby came home, the Department of Social Services called again. His mother was pregnant, was due in three months, and they wanted the children to be together. So three days before Christmas, we brought home the second baby, a half brother, who was perfect in every way. In nineteen months, we had become the parents of three children: ages 2 days, 14 months, and 3 ½.

By the time our second baby was one, it was clear that some things for him were not progressing as they should. Wanting so badly to walk, he could only fall and fall flat on the face causing blackened eyes. I began to notice tremors in the hands when the baby was feeding himself. Language was not developing appropriately. I was devastated

because this second baby was supposed to be “normal”. There had not been the experience of any abuse like the others. This second baby had rarely slept as an infant, but I had cared and loved this baby so much.

Seven neurologists later, we had the first of what would become many diagnoses for both of the babies. Currently, the older child is 11. He has autism, ADHD, and a neurological disorder that presents as Parkinsonism. The younger child is 10 with the same diagnoses. And both continue with diagnoses of reflux, bladder conditions, mood disorders, sleep disorders, and learning disabilities.

We were surprised with the information about an 11 year old child who was in a foster home in our neighborhood. His parents attended our church. They had a house full of girls and wanted to adopt a boy. After having this for nine months, they told us one Saturday that he was leaving on the upcoming Monday. Assuming he was going to be reunited with his family, we were stunned to find out that they had decided they wanted a “real boy,” and they were not planning to adopt him in spite of the fact that they told him they were. As we found out later, on Monday morning during breakfast, they told him to turn his books in at school. His caseworker would be taking him somewhere else. On the Friday before, he had told his resource teacher that when he was adopted, he was going to be able to have someone sleep over with him.

God himself put this child on our hearts. We knew little about him, but the injustice alone was more than we could stand. I finally decided to pray and ask God for “a sign I could recognize” regarding whether or not we should call and request to adopt this child. I knew we had our hands full with three special needs children. The sign? Thirty seconds after I prayed, I passed a Wendy’s marquis that read, “Change the life of a child forever.”

This child is now 18. He has fetal alcohol syndrome, and he has struggled in school. Coming out of a self-contained classroom, he made up his mind that he wanted to earn a diploma. He is now the success story of his high school as he spent three quarters on the honor roll this year. He wants to work in the culinary arts field. He required plastic surgery on his ears to pin them down. He had to have growth hormones to reach his potential size and weight, and we had to induce puberty on him. However, we were his 13<sup>th</sup> placement and his final one. Chances were good he would not have ever been placed. He is a joy in our home.

With years gone by, being the parents of four special needs children, we were letting our foster parent license lapse. We had been parenting our first child for eight years. My husband had been laid off from a job, and I had gone back to teaching. The first day back after Christmas break was a teacher work day, and the children attended at camp at our church. They made individual “king’s cakes” with plastic babies inside. I picked them up and they begged to take the “baby cakes” home with them. Jokingly, I told them we would do NOTHING to encourage any more babies to enter our house. But the four kids and the four “baby cakes” went into the car and home we went.

I sat the baby cakes down on the kitchen counter and went directly to check email. The phone rang within seconds. It was DSS and as usual, I was stunned by their news: our first child's full biological siblings were at the local police department. They would need foster care and adoption. They were six and eight.

Our girl is now 10 and is a Duke Tip Scholar, meaning she is in the top 5% of all fourth graders in the nation. She suffers from generalized anxiety disorder, and she often cannot get away from the memories that haunt her from living with her biological parents, going on drug buys, seeing horrible domestic violence, and dissociating to survive.

Our boy is 12 and has bipolar disorder like his older sister. We are unable to find any post adoption help for him, and he does things like urinating down the air vents in our home, lying constantly, and he's insanely jealous of the boys with autism and with the fact that their behavior program is different from his own. For the protection of everyone in our home, this child has slept on the floor of my and my husband's bedroom for four months now. We are afraid to put him upstairs with the other children. We would have to relinquish rights to be able to place him somewhere for help. And we believe that a child learns to live in a home by living in a home. Yet, we run into brick walls everywhere we go for help.

My point in the details is this: permanency is one answer for foster children, but it does not solve the numerous traumas the child faces on his or her way to reaching that permanency. When we first adopted, our state system was so supportive. Now that our children are getting older and their problems re mixing with academic and social issues, puberty, and the fatigue of my husband and myself, the services are falling away at a rate that is unprecedented. Now that they are reaching ages where we know they will be with us long into adulthood, we have no help. One child has been a client for two years of a state mental health program set up to serve foster children and to keep them in the home – the least restrictive environment, and she has had services for 10 weeks out of those two years.

The question I ask you is this: What would you do if you were me? What would you do if you walked in my shoes?

I implore you to continue to support post-adoptive services and to increase the availability of post adoptive services. Increasing adoptions without providing the support the children and the families need is not the answer. Again, permanency without provisions only creates a situation that is potentially cyclical with children being relinquished back to the foster care system in a situation and an age where they are unadoptable.

Thank you for your time to read my testimony.

